

**Testimony of the Yale Child Study Center regarding  
House Bill 6659 An Act Concerning the State Budget for the Biennium  
Ending June 30, 2025, and Making Appropriations Therefor**  
*Appropriations Public Hearing on the Governor's Proposed Budget for Human Services Agencies  
Wednesday, March 1, 2023*

Senator Osten, Representative Walker, and Honorable Members of the Appropriations Committee, on behalf of the Yale Child Study Center, thank you for the opportunity to provide testimony regarding House Bill 6659 An Act Concerning the State Budget for the Biennium Ending June 30, 2025, and Making Appropriations Therefor, specifically regarding the children's behavioral health care system. The Yale Child Study Center is a department at the Yale School of Medicine which conducts research and provides clinical services and medical training related to children and families. Our clinical services are extensive covering the emergency department, in-patient and day hospital services, and outpatient care including services for families in their home. We are also the coordinating site of southern Connecticut for Access Mental Health and are also with our colleagues in the Yale Department of Pediatrics, providing training for pediatricians on children's behavioral health assessment and basic interventions.

Through this legislation, we have an opportunity to improve the continuum of behavioral health care for children from prevention to intervention. We strongly support prevention and have spoken at length about the need to consider a continuum of care from prevention to intensive intervention. However, addressing only one piece of the continuum will not meet the current complex needs of many children. Many children suffering with more intensive needs require intensive in-home or outpatient services, which are currently overburdened and difficult to access. Furthermore, if a children's need for intensive outpatient services is unmet, they may be forced to seek emergency hospital-based care. To move a patient from hospital-based care to outpatient services, the state must increase support to existing intensive outpatient programs. The ongoing surge in children's mental health needs has revealed weaknesses across this continuum of care for children's behavioral health needs in both the availability of services as well as in the need for additional workforce.

The Yale Child Study Center has experienced a doubling of referrals for outpatient services as well as an increase in the acuity of the clinical presentation. Annually, the Center provides services to over 3,000 unique families across the state, 66% of which are enrolled in Medicaid. Since the beginning of the pandemic, we have scheduled over 112,300 visits, reaching families virtually, at home, in the emergency department, in pediatric offices, in schools and in the clinic. The Center offers several intensive outpatient and in-home programs in which teams of trained staff members work with families to develop treatment plans that can range from mental health and substance use counseling to family counseling to parenting education and support. However, due to the workforce shortage for behavioral health professionals, we are strained and unable to meet the demand for these critical services. Currently, there is about a 2-3 month wait for outpatient care services at the Center, additionally, there

is a 2-4 month wait for patients to receive in-home care services. **In order to increase access to behavioral health care for children and families in need, the state must strengthen existing support for outpatient services and improve reimbursement for behavioral health clinicians.**

We commend the Governor's proposed \$159 million investment in improving behavioral health services in the state. However, we recommend a multipronged approach that supports a **continuum of behavioral health care. We have the components of a continuum in our state. What we need is the support to strengthen and better integrate those components.** We urge the General Assembly and the Lamont Administration to:

1. **Expand support for existing outpatient services including:**
  - A. Intensive outpatient and in-home programs for children and adolescents (e.g., IICAPS)
  - B. Outpatient evaluations and therapy
2. **Increase efforts around prevention.** These include:
  - A. Access Mental Health, a state supported program, provides pediatricians with access to behavioral health clinicians who provide consultation and support for pediatricians in managing a family's behavioral needs within their practice. Across the state, pediatricians cite behavioral health as the most unmet need in their practice. Such support reduces emergency room utilization and increases pediatricians' skills in behavioral health management.
  - B. Supporting behavioral health services in schools including embedding behavioral health clinicians in schools as well as developing an Access Mental Health model for teachers so that they may seek consultation on managing behavioral health issues in their classroom.
3. **Workforce development:** The shortage of behavioral health clinicians available to provide much needed services adds to the crisis in behavioral health services. **The most limiting obstacle for workforce development of these providers is the poor reimbursement for behavioral health services for children and adolescents.** Fee-for-service payments from both commercial payers and Medicaid are insufficient to sustain high quality behavioral health services, especially in outpatient settings. As a result, salaries are low, and students choose to pursue other health care specialties. This inequity is a disincentive to entering the field and especially in the current behavioral health surge.

In conclusion, the continuum of care for children's behavioral health system in the state is critical. The Yale Child Study Center urges you to direct additional resources, including Medicaid rate increases, for community and hospital outpatient behavioral health services, including intensive outpatient and partial hospital programs, school-based health centers, in-home services, and other behavioral health services to better serve children and families in the community and across the state.

Thank you for your time and consideration.

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